
COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION, OR C-I-P)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is for a continuation-in-part (C-I-P) application.

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original, first and joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

METHODS AND COMPOSITIONS FOR THE PREVENTION OR TREATMENT OF NEOPLASIA
COMPRISING A COX-2 INHIBITOR IN COMBINATION WITH AN EPIDERMAL GROWTH
FACTOR RECEPTOR ANTAGONIST

SPECIFICATION IDENTIFICATION

The specification was filed on August 29, 2003, as Serial No. _____, and is further identified as Nelson Mullins Riley & Scarborough Docket No. 18438/09018.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56.

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)
(35 U.S.C. § 119(e))

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER
60/113,786

FILING DATE
December 23, 1998

**35 USC § 119 PRIORITY CLAIM, IF ANY,
FOR ABOVE LISTED U.S./PCT APPLICATIONS**

ABOVE APPLICATION NO.	DETAILS OF U.S. PROVISIONAL OR FOREIGN APPLICATION FROM WHICH PRIORITY CLAIMED UNDER 35 USC § 119		
	Country and Application No.	Date of filing (day, month, year)	Date of issue (day, month, year)
09/470,951	US 60/113,786	23 December 1998	n/a

POWER OF ATTORNEY

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

APPOINTED PRACTITIONER(S)	REGISTRATION NUMBER(S)
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DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Jaime Masferrer

Inventor's signature _____

Date _____

Country of Citizenship US

Residence

Post Office Address
